

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
Special instructions to Fining Officer.			

Office Use Only



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COVER LETTER

Department of Stat New Filing Section Division of Corpor P. O. Box 6327 Tallahassee, FL 32	n rations			
SUBJECT: TE	DIA A-Z INC (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an or	iginal and one (1) copy of the art	icles of incorporation and	l a check for:	
□ \$70,00 Filing Fee	XI \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee. Certified Copy & Certificate of Status PPY REQUIRED	
FROM: _	ADI SHWARTZ Name (Printed or typed)			
	2175 NE 170TH ST #205 Address			
_	MIAMI, FL 33162 City, State & Zip			
	702-882-9961			
	adi@yukaecom.com	elephone number d for future annual report n	otification)	
		•	,	

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporation	n shall be: TEDIA A-Z INC		
<u>ARTICLE II PRINCIP</u> Pr 2175 NE 170TH ST 20	AL OFFICE incipal street address	Mailing address, i	f different is:
ARTICLE III PURPOS. The purpose for which the	E corporation is organized is:ANY A	ND ALL LAWFUL BUSINESS	
	······································		5-3
ARTICLE IV SHARES			<u> </u>
The number of shares of sto			<u>;</u> ;
Name and Title:_	4 D. O. B. (4 D. 7	Name and Title: PRESIDEN	Γ
Address	2175 NE 170TH ST APT 205 MIAMI, FL 33162	Address:	
Name and Title:		Name and Title:	
Address		Address:	
_			
Address			

Name ar	d Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT	
The name and F	lorida street address (P.O. Box NOT acceptable) o	f the registered agent is:
Name:	ADI SHWARTZ	_
Address:	2175 NE 170TH ST APT 205	_
	MIAMI, FL 33162	_
ARTICLE VII	INCORPORATOR	
	Idress of the Incorporator is:	
	·	
Name:	ADI SHWARTZ 2175 NE 170TH ST APT 205	-
Address:		-
	MIAMI, FL 33162	_
ARTICLE VIII	_EFFECTIVE DATE:	
Effective date, if	other than the date of filing:	(OPTIONAL) of be more than five days prior or 90 days after t
filing.)	and is used, the date may be specific and cannot	to be more than tive days prior or 50 days after t
		statutory filing requirements, this date will not be
the toethnent's e	ffective date on the Department of State's records.	
Having been nan certificate. I am f	ned as registered agent to accept service of process f amfliar with and accept the appointment as register	or the above stated corporation at the place designated agent and agree to act in this capacity
JAN .	ted ()	03/23/2021
1,2	Required Signature/Registered Agent	Date
I submit this doc document to the	ument and affirm that the facts stated herein are Reportment of State constitutes a third degree felon	true. 1 am aware that the false information subm. y as provided for in s.817.155, F.S.
Att of		03/23/2021
Required Signatu	in Incorporator	Date

COVER LETTER

Department of State New Filing Section
Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

TEDIA A-Z INC

SUBJECT: TE	DIA A-Z INC		
	(PROPOSED CORPO	RATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
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□ \$70.00 Filing Fee	XI \$78.75 Filing Fee & Certificate of Status	☐ \$78.75 Filing Fee & Certified Copy ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate o Status
FROM:	ADI SHWARTZ Nan	nc (Printed or typed)	
	2175 NE 170TH ST #205	NII.	
	MIAMI, FL 33162	Address	
_	·	, State & Zip	- 11
	702-882-9961		
	Daytime '	Telephone number	
	adi@yukaecom.com		
	E-mail address: (to be use	ed for future annual report no	tification)

NOTE: Please provide the original and one copy of the articles.